

2007 LIMITED PARTNERSHIP ANNUAL REPORT
Due By May 1, 2007

FILED
Jan 09, 2007 08:00 AM
Secretary of State

DOCUMENT # A98000002871

1. Entity Name
HARRISON PARTNERS, LIMITED PARTNERSHIP



Principal Place of Business
**18691 LAKESIDE WAY
TEQUESTA, FL 33469**

Mailing Address
**18691 S.E. LAKESIDE WAY
TEQUESTA, FL 33469**



01032007 No Chg-LP

CR2E003 (12/06)

4. FEI Number
65-0890834

Applied For
Not Applicable

5. Certificate of Status Desired

☒ **\$8.75 Additional
Fee Required**

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301-2525**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

[Signature]
DATE **01/07/07**

**FILE NOW!!! FEE IS \$500.00
After May 1, 2007, Fee will be \$900.00**

**U00000580334
01/10/07-80045-010 508.75**

**A GENERAL PARTNER THAT IS A BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.
NOTE: General Partners MAY NOT be changed on the form; an amendment must be filed to change a general partner.**

12. GENERAL PARTNER INFORMATION

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**HARRISON, GERTRUDE
18691 LAKESIDE WAY
TEQUESTA, FL 33469**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP
**FRANK, LINDA
18691 LAKESIDE WAY
TEQUESTA, FL 33469**

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

DOCUMENT #
NAME
STREET ADDRESS
CITY - ST - ZIP

**DO NOT WRITE
IN THIS SPACE**

14. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a General Partner of the limited partnership or the receiver or trustee empowered to execute this report as required by Chapter 620, Florida Statutes

SIGNATURE: ** Linda Frank*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENERAL PARTNER

01/07/07 *561-747-3247*
Date Daytime Phone #

STAPLE CHECK HERE